

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	94		4-28-00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S.E.	69134	6-22-00
RESPONSE FORMALITY REVIEW	11	11	7-31-2000

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Original	7-22-00
1 ✓	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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